

U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/009,674	INTERNATIONAL APPLICATION NO. PCT/US00/40156	ATTORNEY'S DOCKET NUMBER 3142.2.2.8
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17. <input checked="" type="checkbox"/> The following fees are submitted: <b>BASIC NATIONAL FEE (37 CFR 1.492(a)(1)-(5)):</b> Search Report has been prepared by the EPO or JPO ..... \$ 890.00 International preliminary examination fee paid to USPTO (37 CFR 1.482) .. \$ 710.00 No international preliminary examination fee paid to USPTO (37 CFR 1.482) but international search fee paid to USPTO (37 CFR 1.445(a)(2)). ..... \$ 740.00 Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO ..... \$1040.00 International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(2)-(4) ..... \$ 100.00  <div style="text-align: right;">ENTER APPROPRIATE BASIC FEE AMOUNT = \$</div>	<b>CALCULATIONS (PTO USE ONLY)</b>           
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Surcharge of <b>\$130.00</b> for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$130.00	
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CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total Claims	20	(above 20)	X \$ 18.00	\$	
Independent Claims	3	(above 3)	X \$ 84.00	\$	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$280.00	\$	
<b>TOTAL OF ABOVE CALCULATIONS =</b>				\$	
Reduction of 1/2 for filing by small entity, if applicable.				\$65.00	
<b>SUBTOTAL =</b>				\$65.00	
Processing fee of <b>\$130.00</b> for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				+	\$
<b>TOTAL NATIONAL FEE =</b>				\$	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00</b> per property				+	\$
<b>TOTAL FEES ENCLOSED =</b>				\$65.00	

9/27/97 13:00 00000000 00000000 00 100000	Amount to be refunded: \$ charged \$
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a. ☒ A credit card payment form for the amount of \$65.00 to cover the above fees is enclosed.

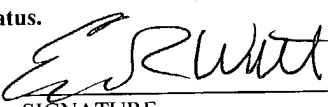
b. ☐ Please charge my Deposit Account No. \_\_\_\_\_ in the amount of \$\_\_\_\_\_ to cover the above fees. A duplicate copy of this sheet is enclosed.

c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 13-0763. A duplicate copy of this sheet is enclosed.

**NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.**

SEND ALL CORRESPONDENCE TO:

**MADSON & METCALF**  
 15 West South Temple, Suite 900  
 Salt Lake City, Utah 84101  
 United States of America  
 Telephone: (801) 537-1700

  
 SIGNATURE

\_\_\_\_\_  
 NAME

32,512  
 REGISTRATION NUMBER